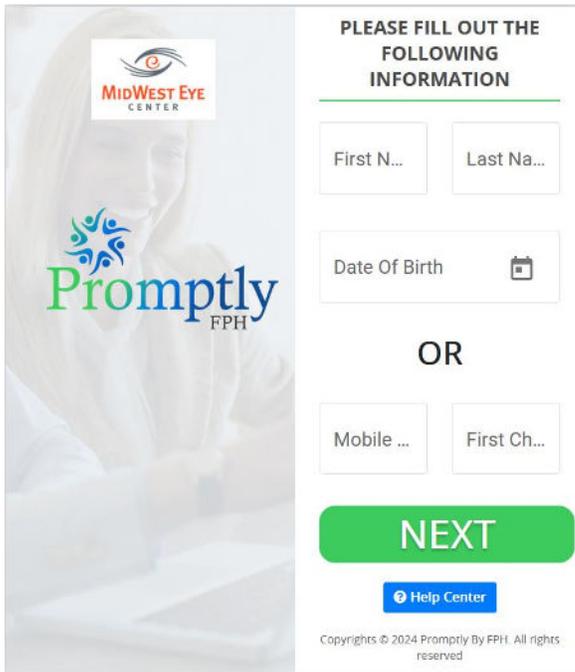


How To Registrar On The Promptly Patient Portal

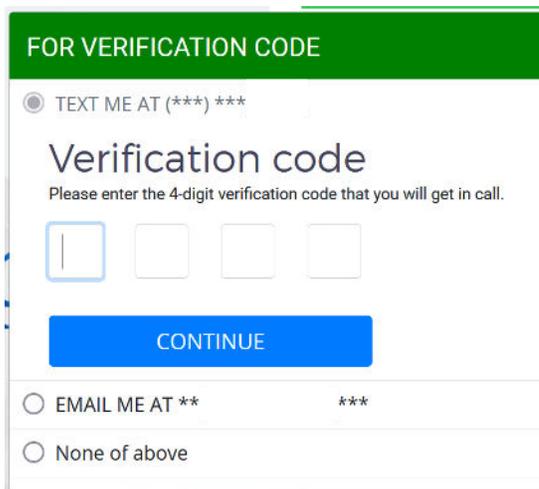
Step 1: Open the Promptly Portal Link from our website or the link you received via text message or email.

1. Enter your First Name, Last Name, and Date of Birth. Alternatively enter your mobile number and the first character of your last name.



The screenshot shows the registration form for the Promptly Patient Portal. On the left, there is a background image of a smiling woman with the MidWest Eye Center logo and the Promptly FPH logo. The main form area is titled "PLEASE FILL OUT THE FOLLOWING INFORMATION". It contains two sets of input fields: "First N..." and "Last Na..." for name, and "Date Of Birth" with a calendar icon. Below these is the word "OR" and another set of fields: "Mobile ..." and "First Ch...". A large green "NEXT" button is prominent, with a smaller blue "Help Center" button below it. At the bottom, there is a copyright notice: "Copyrights © 2024 Promptly By FPH. All rights reserved".

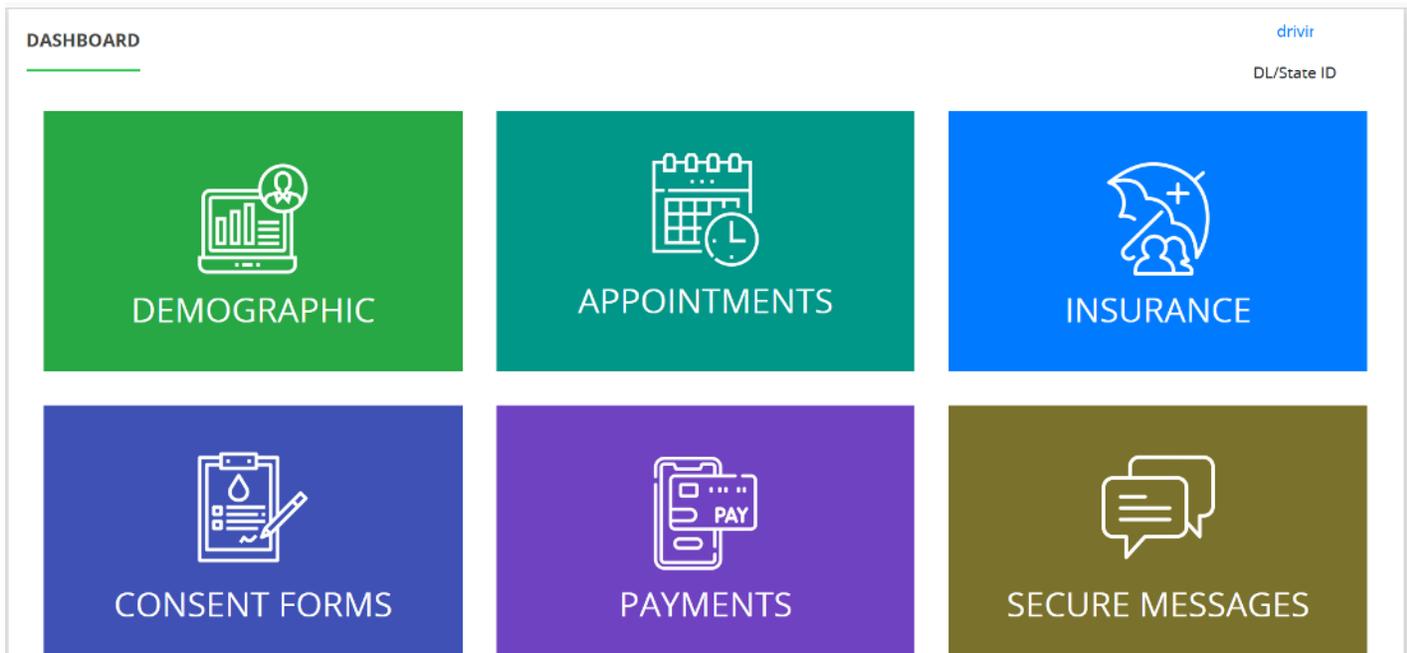
2. Click Next



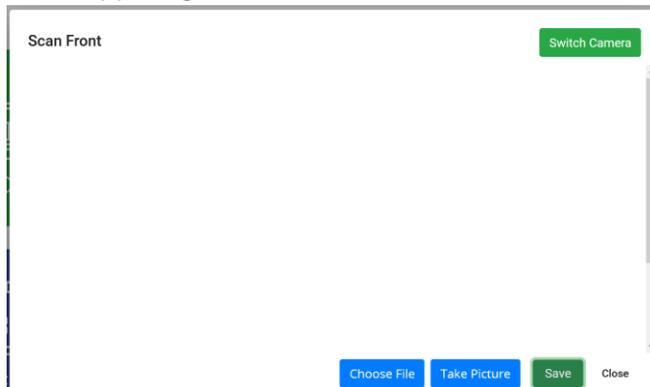
The screenshot shows the verification code screen. At the top, there is a green header with the text "FOR VERIFICATION CODE". Below this, there is a radio button selected for "TEXT ME AT (***) ***". The main heading is "Verification code" with the instruction "Please enter the 4-digit verification code that you will get in call." Below this is a row of four input boxes for the code, with the first box containing a vertical line. A blue "CONTINUE" button is positioned below the input boxes. At the bottom, there are two more radio button options: "EMAIL ME AT **" and "None of above".

3. A pop-up will appear. Select the method you would like to use for verification.
4. Enter the code and select continue.

Step 2: Promptly Dashboard



1. In the upper right corner, click on the  Driver License/State ID Icon.



2. Here you can either select a photo file of your license or you may take a new picture.
3. Once loaded (file) or taken (photo) and you are happy with the image save the file and close the window.
4. Next click on the green Demographic Square.

PATIENT DEMOGRAPHIC Fields with red border are Un-Approved change.
* Required fields.

Title <input type="text" value="Select Title"/>	First Name * <input type="text"/>	Middle Name <input type="text"/>	Last Name * <input type="text"/>	Suffix <input type="text"/>
Date Of Birth * <input type="text"/>	Age * <input type="text"/>	Sex At Birth * <input type="text"/>	Marital Status <input type="text"/>	Language * <input type="text"/>
Referring Physician <input type="text"/>	Primary Care Physician <input type="text"/>			

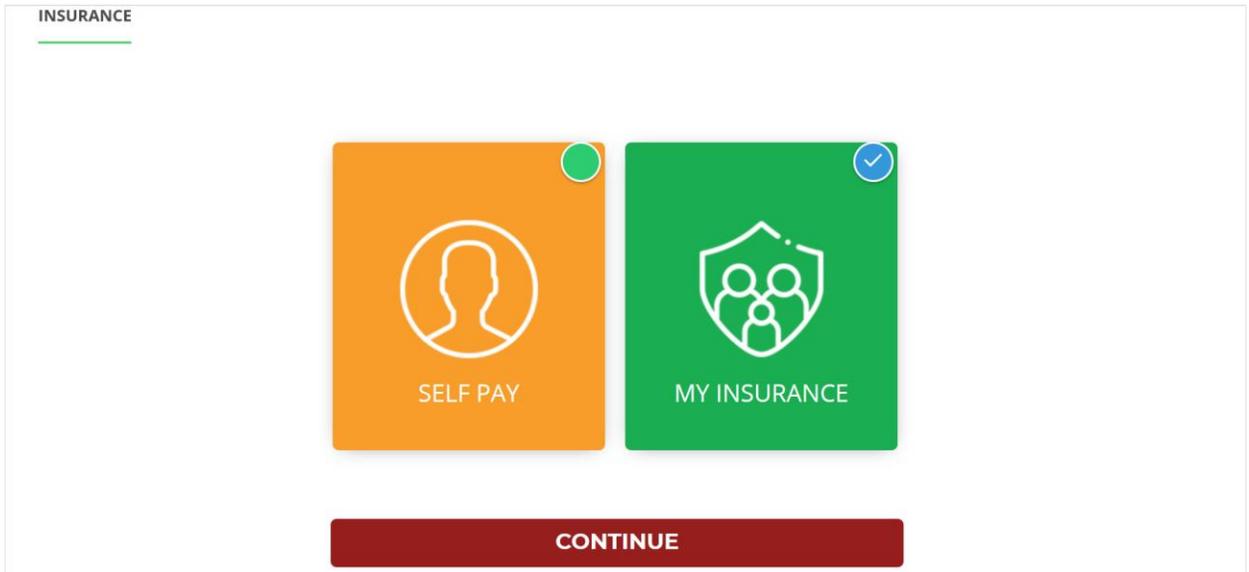
COMMUNICATION

Mailing Address 1 * <input type="text"/>	Mailing Address 2 <input type="text"/>	Zip Code * <input type="text"/>	City <input type="text"/>	State <input type="text"/>
Country <input type="text"/>	Country <input type="text"/>			
Home Phone * <input type="text"/>	Work Phone <input type="text"/>	Mobile Phone * <input type="text"/>	Email <input type="text"/>	

EMERGENCY CONTACT

Name <input type="text"/>	Contact Number <input type="text"/>
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5. Any item with an asterisk * is required. You do not need to complete the other fields, but it will save you time once at the office.
6. Please do not use a fake email address. If you do not wish to provide just leave it blank.
7. Click Update and you will return to the Dashboard.
8. Next Click on the Blue Insurance Link.



9. If you do not have insurance, select “Self-Pay” and continue.

10. If you have insurance click “My Insurance” and continue.

11. Enter your Primary Insurance. If there is a pencil as above, click it and add or update the information. If there is not a pencil, click the + Add Insurance in the Primary Field.

12. Enter Secondary Insurance if applicable.



13. Once you have completed your insurance information. You can click on the hamburger button  in the upper left corner of the screen for the menu.

14. Select either Dashboard or Consent forms. If you go to the Dashboard select the dark blue button Consent forms.

15. Here will be any form you need to complete. Please complete each form.

16. Once the forms are completed. Go back to the hamburger button and select Payments.

17. In payments if you have a balance or a copayment you may make a payment.

Thank you for completing your registration prior to your appointment.